## Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>2-7-20</u>	Address:	5992 E CR 900S
Case #:	<u>35-30144</u>		Stendal, IN
County:	<u>Pike</u>		
Type of Laboratory Seizure (check one)  ☐ Operational Lab ☐ Chemical/Glassware/Equipment (only) ☐ Dumpsite (only)		Seizure Location (o  ☐ Residence ☐ Outbuilding ☐ Vehicle	check all that apply)  Hotel/Motel Open – No Structure Other:
(check all the Lithium Lithium Red Photosite Red Photosit	nd: Location (bedroom, kitchen, open and apply)  n/Ammonia Reaction(s):  osphorous/Iodine Reaction(s):  able Solvents: outbuilding  Reactive Metal (Lithium): outbuilding  rous Ammonia:  hloric Acid Gas Generator(s): outbuilding  we Acid: outbuilding  we Base: outbuilding  item and location):	·	
Yes 3 No *If yes, fax re	hild under age 18 discovered (check one)  Yes 3 (number present)  No  Fyes, fax report to Child Protective Services  Investigative Information  Ephedrine/Pseudoephedrine Tracking  Retail/Merchant Tip  Other:  Other:		ne/Pseudoephedrine Tracking Log lerchant Tip
Fire Department: lockhart twp VFD  Fax: 812 563-2211			
_	partment: Pike Co	Fax: 812 354 2532	
•	ection Service: Pike Co CPS	Fax: <u>812.3</u>	354 9811
For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>Trp. John Davis</u> Phone <u>812 867 2079</u>			

- \*\* This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.
- \*\*\* This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.